

REC'D 01/20/01

TECH CENTER 1600/2900

Dkt. 99181

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

NATHAN H. SECANE

Group Art Unit: 1653

Serial No.: 08/986,606

Examiner: A. Davenport

Filed: December 8, 1997

For: SIXTEEN AMINO ACID OF THE ANTINEOPLASTIC PROTEIN (ANUP)
AS A PHARMACOLOGICALLY ACTIVE ANTI-TUMOR AGENT

PETITION UNDER 37 CFR § 1.136

Honorable Commissioner of Patents and Trademarks
Washington, D.C. 20231

Sir:

Petition is herein made under the provisions of 37 CFR 1.136 for an extension of time for three months for response to the Notice concerning sequence disclosure of of September 26, 2000.

The appropriate small entity fee set forth in 37 CFR 1.17 is to be paid by credit card. A Credit Card Payment Form (PTO-2038) is attached hereto. The Commissioner is hereby authorized to charge payment of any additional filing fees required under 37 CFR 1.16 or any patent application processing fees under 37 CFR 1.17, or credit any over payment to the credit card

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account shown on the attached Credit Card Payment Form.

Refund of all amounts overpaid, including those of twenty-five dollars or less, is specifically requested. Any fees not accepted by the credit card shown on the Form PTO-2038 may be charged to Deposit Account 04-0753.

Respectfully submitted,

Burton Scheinier

Burton Scheinier
Registration No. 24018

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United States Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Credit Card Expiration Date: 07/03

Name as it Appears on Credit Card: Donald L. Dennison
Dennison Law Firm

Payment Amount: \$(US Dollars): \$445.00

Signature: *Donald L. Dennison* Date: January 26, 2001

Refund Policy: The Office may refund a fee paid by mistake or in excess of that required. A change of purpose after the payment of a fee will not entitle a party to a refund of such fee. The Office will not refund amounts of twenty-five dollars or less unless a refund is specifically requested, and will not notify the payor of such amounts (37 CFR 1.26). Refund of a fee paid by credit card will be via credit to the credit card account.

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Credit Card Billing Address

Street Address 1: 612 Crystal Square 4

Street Address 2: 1745 Jefferson Davis Highway

City: Arlington

State: VA

Zip/Postal Code: 22202

Country: U.S.A.

Daytime Phone #: (703) 412-1155

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Request and Payment Information

Description of Request and Payment Information:

3 month extension fee - Sloane

<input checked="" type="checkbox"/> Patent Fee	<input type="checkbox"/> Patent Maintenance Fee	<input type="checkbox"/> Trademark Fee	<input type="checkbox"/> Other Fee
Application No. 08/986,606	Application No.	Serial No.	IDON Customer No.
Patent No.	Patent No.	Registration No.	
Attorney Docket No. 99181	Identify or Describe Mark		

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